

TAMALA HOLLAND
PARALEGAL SPECIALIST
DESIGNATED OFFICE
(303) 308-8483

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. 10/088,852		FILING DATE 3/24/09	
							APPLICANT(S)			
							CLAIMS			
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	
1	1		1				51			
2		1		1			52			
3		1		1			53			
4		3		3			54			
5		2		2			55			
6		2		2			56			
7	1		1				57			
8		1		1			58			
9		1		1			59			
10		1		1			60			
11		1		1			61			
12		1		1			62			
13		1		1			63			
14	1		1				64			
15		1		1			65			
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47							97			
48							98			
49							99			
50							100			
TOTAL IND.	3		3				TOTAL IND.			
TOTAL DEP.	16		18				TOTAL DEP.			
TOTAL CLAIMS	19		21				TOTAL CLAIMS			

TO-1300 (3-76)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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